

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 9/1/2014.

	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois) *	Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	4,034,968	+2.4%
	Life of Insurance		

*

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: _____

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): NCCI IL-2013-03

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Grange Mutual Casualty Insurance Company

Name of Company

L. Alicia Williams - Sr. Commercial Actuary

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 8/1/2014

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	35,843	-9.5%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: Yes

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Implementation of class deviations. Exhibit 2 contains the classes to be deviated. The Standard LCM of 1.88 will remain unchanged. The classes to be deviated will be credited 10% with a Preferred LCM of 1.69

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Markel Insurance Company

Name of Company

Margaret L. Pollard Senior Regulatory Compliance Analyst

Official - Title

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	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois) *	Percent Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2.	Automobile Physical Damag		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	1,610,663	-3.0%
	Life of Insurance		

* Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: _____

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): NCCI IL-2013-03

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Trustgard Insurance Company

Name of Company

L. Alicia Williams - Sr. Commercial Actuary

Official - Title